B-28A. Did the doctor say you had a condition that made it difficult to conceive?

1 = YES $2 = NO \rightarrow SKIP TO B BOX.$

B-29A. What did the doctor say the <u>main</u> condition was--did the doctor give it a medical name?

ENTER CONDITION OR PROBLEM NAME (LIMIT OF 40 CHARACTERS)

| В | IF FERTILITY PROBLEM OCCURRED WITH MORE THAN ONE PARTNER (B-23=YES), |
|-----|--|
| BOX | CONTINUE. OTHERWISE, SKIP TO SECTION C. |

Earlier you told me there was another wife or partner with whom you tried for a year or more to conceive a child but were unable to do so.

B-24B. In what year did you first have this difficulty with your other wife or partner?

ENTER LAST 2 DIGITS OF YEAR.

(EDIT :.)

B-25B. Did your [wife/partner] see a doctor to discuss difficulties in conceiving children?

1 = YES $2 = NO \rightarrow SKIP TO B-27B.$

B-26B. Did the doctor say your [wife/partner] had a condition that made it difficult to conceive?

1 = YES 2 = NO

B-27B. Did you see a doctor about this difficulty with your [wife/pantner]?

1 = YES $2 = NO \rightarrow SKIP TO SECTION C.$

B-28B. Did the doctor say you had a condition that made it difficult to conceive?

1 = YES $2 = NO \rightarrow SKIP TO SECTION C.$ B-29B. What did the doctor say the <u>main</u> condition was--did the doctor give it a medical name?

ENTER CONDITION NAME (LIMIT OF 40 CHARACTERS).

APPENDIX B Birth Defects Coding Guidelines

GENERAL CODING GUIDELINES

- 1. In coding these responses, we used the International Classification of Disease 3, Ninth Revision (ICD-9) tabular and alphabetical indices.
- 2. Many of the verbatim responses clearly indicated congenital conditions and they were given congenital anomaly codes. Many responses, however, indicated a condition that could be acquired. Some of these conditions are:

Anemia Hydrocephalus Seizures Pneumonia

We have assumed that these conditions, if given in response to the birth defect question, are congenital or perinatal conditions and have given them the appropriate codes.

3. Other responses were not always as easy to code. We tried to distinguish true structural anomalies from illnesses or disorders. Certain words, for example, helped us distinguish an anomaly:

| Code as Anomaly | Code as Illness |
|---|---|
| Deformity Malformation Undeveloped Anomaly Defect | Disorder Problem Disease Malfunction/dysfunction |

These synonyms were used to decide what code was applicable if the conci ion was not well described.

- 4. Following these general coding guidelines is an alphabetical index of disease categories or organ systems containing various conditions and their proper codes. Many of these conditions represent actual responses given by the veterans as recorded by the interviewers. We have grouped identical or similar verbatims under the same code (i.e., all respiratory problems are coded as 770.8). Also within this index, the medical words, along with their common terminology, are documented; for example—hypospadias or
 - hole not in right spot
 - hole comes out under penis
- 5. In some instances, an asterisk (*) may precede a condition in the index. In this case, the code that was given is a contradiction to the ICD-9 index *e.g.*, "cyst of Eye."

The ICD-9 index directs the coder to 743.0 for "cyst of eye." This code is a congenital absence of the eye. The condition is very serious and rare. We have, herefore, assumed that this response probably reflects a cyst of the eyelid and not of the eyeball itself, and we assigned the code 373.3.

- At times, we had to code two distinct conditions given in a single response. In such cases, we coded the first condition, unless the second was clearly more serious. For example
 - a. Heart murmur/asthmaEye problems/prematurity

In these examples, both conditions are of equal severity; therefore, we coded the first condition.

b. Breathing problems/cerebral palsy

In this instance, we coded the second condition, "cerebral palsy," sinc: it is considered more serious than the first condition.

7. Judging from some verbatims, the veteran was not sure what type of condition his child had. Responses such as "badly deformed" and "would have been a vegetable" clearly indicate severe congenital anomalies. Although we did not know what condition the child had, we could assign a code of 759.9 for "congenital anomaly, unspecified."

| ALLE | ERGIES | |
|------|---|-------|
| 1. | Allergy to milk/formula - code as intestinal malabsorption | 579.8 |
| 2. | Allergies, multiple allergies | 995.3 |
| 3. | Allergies to drugs, pollen, etc. — code as directed in index | |
| BLO | OD DISEASES | |
| 1. | Infection with blood cells | 771.8 |
| 2. | Broken blood vessels Blood blisters | 772.6 |
| 3. | Rh disease Needed blood transfusion (Rh factor) | 773.0 |
| 4. | Problem with bilirubin count in blood — see "jaundice" | 774.6 |
| 5. | Anemia Low red blood count Low hemoglobin | 776.5 |
| 6. | Low white blood count | 776.8 |
| 7. | Blood disease/disorder/problem Thick blood | 776.9 |
| DIG | ESTIVE SYSTEM | |
| 1. | Digestive reflux | 530.1 |
| 2. | Stomach disorder/problems | 537.9 |
| 3. | Liver problems/ailment | 573.9 |
| 4. | Tongue tied Skin attached to tongue | 750.0 |
| 5. | Esophageal atresia/tracheoesophageal fistula Food tube went to lungs Esophagus does not join stomach Did not have an esophagus | 750.3 |
| 6. | Pyloric stenosis Stomach muscle closed stomach Restriction of stomach valve Blockage of stomach opening Valve of stomach bottom closed Outlet from stomach too small Muscle obstruction of stomach Opening/stomach/intestinal enlarged muscle Pyloric valve malformed | 750.5 |

| 7. | Other anomalies of stomach Stomach valve wouldn't close Blockage in stomach Hole in stomach Born without stomach Malformation Bubble in stomach | 750.7 |
|-----------|---|---------------|
| 8. | Malformed throat pipe | 750.9 |
| 9. | Intestinal blockage/obstruction, NOS Undeveloped/not formed bowels Abdominal obstruction | <i>7</i> 51.1 |
| 10. | Imperforate anus Rectal opening too small Undersized rectum Rectal tract too small Anal obstruction | 751.2 |
| 11. | Other anomalies of intestines Redundant colon Intestines "stuck together" Enlarged intestines Anal web | 751.5 |
| 12. | Umbilical cord attached to intestines | 756.7 |
| 13. | Intestinal, digestive (tract) problem/disorder Trouble passing bowels | <i>1</i> 77.9 |
| EAR | AND NECK | |
| 1. | Hearing Problems | /41.2 |
| 2. | Otitis media Ear infection Fluid in ears Tubes in ears Tube from ear to throat | 382.9 |
| 3. | Hearing deficiency | 389.9 |
| 4. | Underdeveloped ear canal Atresia | 744.0 |
| 5. | Tab or tag on ear | 744.1 |
| 6. | Other specified anomalies of ear Cauliflower ear Pointed ear Misshapen ear Sunken eardrum | 744.2 |

| Unspecified anomaly of ear Deformed ear (canal) Malformation of ear (canal) | 744.3 |
|---|--------------------------------------|
| Branchial cleft, cyst, or fistula Hole in neck/next to sideburns Opening in neck/hole | 744.4 |
| ENDOCRINE SYSTEM | 250.0 |
| Diabetes Diabetes-like condition | 259.9 |
| 2. Hormone imbalance | |
| 3. Calcium deficiency | 275.4 |
| 4. Immune deficiency | 279.3 |
| 5. Undeveloped immune system | 279.9 |
| EYE AND LACRIMAL SYSTEM | |
| 1. Vision problems | V41.0 |
| Eye problems (includes eye nerve prob no mention of muscle problems (see eye | lems) with V41.1 ye muscle problems) |
| 3. Astigmatism | 367.2 |
| 4. Eye deficiency — code as blindness | 369.0 |
| *Cyst of eye (under, over, etc.) Includes dermoid cyst | 373.3 |
| 6. Eyelid/eye does not open | 374.4 |
| 7. Blocked tear ducts Plugged up tear ducts Closed up tear ducts Lump in tear ducts | 375.5 378.0 |
| 8. Esotropia (cross-eyed) | 378.1 |
| 9. Exotropia (wall-eyed) | 378.2 |
| 10. Lazy eyeTurned eye (in) (out)Wandering eyeFloating eye | |
| 11. Weak eye muscles(Eye) muscle problemsStrabismus | 378.9 |

| 12. | Spasm of eye Nystagmus Twitching eye Can't keep straight | 379.5 |
|-----|---|-------|
| 13. | Droopy eyelids Sleepy eyelids Granulated Ptosis | 743.6 |
| *C | ontradicts ICD-9 index | |
| GEN | IITOURINARY SYSTEM — KIDNEY AND URETER | |
| 1. | Kidney infection | 590.9 |
| 2. | Reflux of kidney Reflux of ureter Reflux of bladder Surgery relocation tube — bladder/kidney | 593.7 |
| 3. | Other nonstructural diseases of kidney Ailment (of) kidney Problem (with) kidney Disease (of) kidney Malfunction/nonfunctioning kidney Disorder (of) kidney | 593.9 |
| 4. | Obstructive defects of renal pelvis and ureter Hydronephrosis Ureteral atresia Tubes leading to bladder too short | 753.2 |
| 5. | Other anomalies of kidney Hole in kidney Two valves in kidney instead of one Born with three kidneys Accessory kidney | 753.3 |
| 6. | Defective kidney | 753.9 |
| GE | NITOURINARY SYSTEM — BLADDER AND URINARY TRACT | |
| 1. | Bladder disorder Dysfunction Problem | 596.5 |
| 2. | Spasmodic bladder | 596.8 |
| 3. | Blocked urinary tract Obstructed Could not pass urine | 599.6 |

| 4. | Urinary problems/difficulties | 599.9 |
|-----------------|--|-------|
| | ITOURINARY SYSTEM — MALE GENITALIA | |
| 1. | Undeveloped foreskin on penis Penile adhesion Excessive foreskin over penis Not enough skin for circumcision | 605.0 |
| 2. | Other disease of genital organs Swollen testicles Enlarged testicles Liquid draining from testicles | 608.8 |
| 3. | Unspecified Genital problems Knot in testicles | |
| 4. | Undescended testicles Testicles not in proper place Testicles out of place | 752.5 |
| 5. HE | Hypospadias (Penis) hole not in right place (Penis) hole dislocated (Penis) (urethra) hole comes out (below) (under) (middle of) penis EART AND CIRCULATORY SYSTEM | 752.6 |
| 1 | | 424.0 |
| 2 | and the season of the season o | 427.9 |
| 3 | 3. Enlarged heart | 429.3 |
| 4 | 4. Hole in heart | 745.9 |
| į | 5. Hypoplastic right ventricle | 746.0 |
| | 6. Other anomalies of heart Shunt in the heart Blockage (of tube) of heart Defective heart valve Artery (tube) to heart bent Not fully developed Restricted blood flow in heart | 746.8 |

| 7. | Anomaly of aorta "Blue baby" Congenital heart disease Heart defect/problem | 746.9 |
|-----|--|-------|
| 8. | Heart murmur (functional) Echo in heart | 785.2 |
| CIR | CULATORY SYSTEM | |
| 1. | Peripheral vascular anomalies Non born blood vessels Small arteries Arterio-venous malformation, NOS Raised blood vessels | 747.6 |
| 2. | Circulatory anomalies of head or brain Weak capillary in brain Big blood vessel on head Arterio-venous malformation of brain Other specified anomalies of cerebral vessels | 747.8 |
| 3. | Unspecified anomalies of circulatory system Persistent fetal circulation | 747.9 |
| HEF | RNIA AND HYDROCELE | |
| 1. | Inguinal and groin (includes double hernia) | 550.9 |
| 2. | Umbilical hernia Ruptured belly button Navel rupture Oversized navel (had to be cut) Navel correction outward | 553.1 |
| 3. | Stomach hernia Penis hernia *Testis | 553.8 |
| 4. | Hernia, NOS | 553.9 |
| 5. | *Omphalocele Prune belly Abdominal muscle not developed Umbilical cord attached to intestines | 756.7 |
| 6. | Congenital hydrocele | 778.6 |
| | | |

*Contradicts ICD-9 index.

ABDOMINAL WALL 771.4 1. Omphalitis Navel would not heal Muscle in navel slow in closing MUSCULOSKELETAL SYSTEM — HEAD AND SKULL 754.0 1. Specified deformities of head Asymmetric head Indentation Enlarged head Molded head 756.0 2. Specified deformities of skull Premature closure of sutures Absence of skull bones Craniosynostosis Deformity of forehead Cranial facial anomalies includes: anomalies of soft spot 767.0 3. Hematoma Hematoma of brain (includes subdural hematoma) 767.1 4. Hematoma of skull or head 772.6 5. All cutaneous hemorrhages (hematoma) - includes "broken blood vessels" of neck or head; blood blisters of head; blood lump MUSCULOSKELETAL SYSTEM - MUSCLES 569.4 1. Rectum - no rectal muscles 599.9 2. Weak muscles in kidney 728.9 3. Muscle weakness Low/poor muscle tone Hypotonia 756.8 4. Other specified anomalies of muscles Spastic torticollis (congenital) Absence/shortened muscle or tendon Protruded muscle (in stomach) Locked muscles (in stomach) Tight muscles (in throat)

| MUS | CULOSKELETAL SYSTEM - ORTHOPEDIC DEFORMITIES | |
|-----|---|---------------------|
| 1. | Dislocation of hip/out of socket/out of place hip joint | 7'54.3 |
| 2. | Bowlegs; includes curvature of legs | 754.4 |
| 3. | Varus deformity Feet (ankles) or legs turned in; foot turned in; pigeon-toed | ·''54.5 |
| 4. | Valgus deformity Feet (ankles) or legs turned out; foot turned out; flat foot | ^{.,} 754.6 |
| 5. | Clubfoot Congenital deformity of foot Other specified deformity of foot | 754.7 |
| 6. | Absence (congenital amputation) of any part of (upper) (lower) limb $-$ includes fingers and toes $-$ code as reduction deformity | 755.2-755.4 |
| 7. | Other deformities of lower limbs (includes hip and toes) Tibial torsion Twisted/crooked leg Feet turned, NOS Hip deformity (includes undeveloped hip, no hip balls) | 755.6 |
| 8. | Fracture of clavicle/collarbone | 767.2 |
| 9. | Dislocation of shoulder at birth Separated shoulder Dislocated collarbone | 767.3 |
| MU | SCULOSKELETAL SYSTEM - SPINE | |
| 1. | Pilonidal cyst Cleft/dimple of spine | 685.1 |
| 2. | Scoliosis Curvature of spine | ''54.2 |
| 3. | Other deformities of spine Hole at (base) tailbone/rump/spine Opening on tailbone Absent vertebra Hemivertebra | ⁷ 56.1 |

| MUS | CULOSKELETAL SYSTEM - THORACIC | |
|-----|---|----------------|
| 1. | Anomalies of chest wall Breast plate slightly concave Sunken chest Chest bone caved in Concave chest Chicken breast Undeveloped chest Hole in bone of chest Anomalies of ribs and sternum | 754.8 756.3 |
| | Malformation (of) sternum Deformity of (ribs) (sternum) (Fusion) (Ribs grew together) | |
| NEC | DNATAL CONDITIONS | 705.0 |
| 1. | Immaturity Specified as <7 months' gestation | 765.0 |
| 2. | Prematurity, unspecified Specified as >7 months' gestation | 765.1 |
| 3. | Prematurity with jaundice | 774.2 |
| 4. | Jaundice Yellow jaundice Problem/elevation of bilirubin count Yellow spots on body Liver problems (had to be kept under lights) | 774.6 |
| NE | OPLASMS | |
| 1. | Cyst and polyp — code under heading in index. If not in index, code as "benign neoplasm" | |
| 2. | Tumor - code as neoplasm, unspecified nature | |
| 3. | Growth — code as neoplasm, unspecified nature unless it is stated as a benign growth; then code as benign neoplasm | |
| NE | RVOUS SYSTEM AND BRAIN | |
| 1 | . Emotionally handicapped | 313.9 |
| 2 | . Impairment of motor skills | 315.4 |
| 3 | . Mentally handicapped — code as mental retardation | 319.0 |
| 4 | . Paralysis | 344.9 |
| 5 | . Brain dysfunction | 348.3 |

| б. | Neurologic deficit Neurologic problem Impaired neurologic development | .149.9 |
|-----|--|--------|
| 7. | Pinched nerve — arm | 354.2 |
| 8. | Pinched nerve — neck | 723.9 |
| 9. | Hydrocephalus (congenital) Fluid on head Water on brain | 742.3 |
| 10. | Tethered spine Tethered cord (spine) | 742.5 |
| 11. | Incompletely formed optic nerve Undeveloped nervous system | 742.8 |
| 12. | Unspecified anomalies of brain, spinal cord, and nervous system Malformation | 742.9 |
| 13. | Hematoma of brain (includes subdural, cerebral) | 767.0 |
| 14. | Hematoma of head/skull | 767.1 |
| 15. | *Brain damage | 768.9 |
| 16. | Convulsions/seizures | 779.0 |
| 17. | Nervous condition Includes other ill-defined perinatal conditionsz | 779.8 |
| 18. | Abnormal brain waves | 794.0 |
| *C | ontradicts ICD-9 index. | |
| RES | SPIRATORY SYSTEM | |
| 1. | Misformed/malformed/disease of adenoids | 74.9 |
| 2. | Bronchial infection (not stated as due to birth) Code as bronchitis | 90.0 ، |
| 3. | Pulmonary edema/fluid in lungs | £14.0 |
| 4. | Choanal atresia No opening in nose for breathing Nasal passages too small | 748.0 |
| 5. | Other anomalies of nose Abnormal bone in nose | 748.1 |

| 6. | Perforation of lung Disorder Hole Malformation Spot on lung/removed upper lobe (Note: because of removal of upper lobe, this was given a more severe lung anomaly code) | 748.6 |
|-----|---|-------|
| 7. | Asphyxia/stopped breathing at birth | 768.9 |
| 8. | Pneumonia Respiratory infection at birth | 770.0 |
| 9. | Aspiration pneumonia/pneumonitis | 770.1 |
| 10. | Undeveloped lungs Immature lungs Premature lung problems Respiratory tract not fully developed | 770.4 |
| 11. | Collapsed lungs/atelectasis | 770.5 |
| 12. | Breathing problems/respiratory problem Bronchial problems Respiratory difficulty Respiratory distress Could not get oxygen to blood Cyanosis at birth | 770.8 |
| SK | | 709.0 |
| 1. | Dyschromia Discoloration Spots Splotches | 709.0 |
| 2. | Other disease of skin Bumps Blisters Pimples | 709.8 |
| 3. | Unspecified diseases Dry skin Cradle cap Shedding of skin Skin problem Skin disease | 709.9 |

| 4. | Congenital anomalies Birthmarks Epidermolysis bullosa Urticaria pigmentosa Strawberry (marks) on skin | ,57.3 |
|-----|--|-------------------|
| 5. | Edema of skin Fluid between skin layers | 778.5 |
| 6. | Rashes Skin eruption Sensitive skin | `'82 . 1 |
| 7. | Changes in skin texture Thick skin Thin skin | ''82.8 |
| SYN | IDROMES | |
| 1. | Kawasaki's disease | 146.1 |
| 2. | Cornea delorde syndrome — should be called Cornelia de Lange's syndrome Prader-Willi syndrome Puppet Syndrome — retardation — should be called "Happy Puppet syndrome" Russell-Silver syndrome | 759.8 |
| 3. | Near miss SIDS (sudden infant death syndrome) Near crib death Near miss syndrome | ⁷ 70.8 |

APPENDIX C Nonindependence of Child Outcomes

In this study, the data were collected in a nested data structure, with veterans as the first level and their children as the second level. In the first level, veterans were selected at random; therefore, veterans constituted independent observations. In the second (children) level, several children may come from one family; therefore, there may be a correlation among children within a family. In other words, the children may not be independent observations. Because the unit of observation may not be independent within a family, application of standard logistic regression, which assumes independent observations, may not be appropriate. In this situation (the presence of nonindependence for the children, but not for the veteran), the estimators of the standard logistic model, as used in BMD⁻²LR or in the SAS LOGIST package, are still consistent, but the variance of the estimators is affected (Liang and Zeger, 1986). In other words, ignoring nonindependent observations leads to incorrect variance estimates for the regression coefficients.

We evaluated the degree of nonindependence in the children by comparing the results of the standard logistic method with the results of a modified logistic method that accounts for nonindependence.

Generally, two approaches are used to analyze data that are nonindependent. One approach is referred to as the "conditional logistic" model. The two types of conditional models are the transitional or state dependence model and the random-effects model. The transitional model uses, in its logistic form, a probability function for one outcome (response) in a family, given other outcomes in that family. Because the logistic form is defined as a conditional probability function within a family, this approach is most appropriate if the objective of the study is to evaluate the association of outcome within a family. This approach is advocated by Rosner (1984), Bonney (1986), and Connolly and Liang (in press). The random-effects model uses the conditional distribution of a response given a random effect (Anderson and Aitkin, 1985; Stiratelli et al., 1984; Zeger et al., 1987). In this model, subject-to-subject heterogeneity is explicitly modelled. Zeger et al. (1987) refer to this model as the subject-specific (SS) model. Thus, as in the transitional model, the regression coefficients have subject-specific interpretation.

The second approach is referred to as the "marginal logistic" model. In the logistic form of this model, a marginal probability function is used for each observation (Liang and Zeger, 1986; Stram et al., (in press); Zeger et al., 1987; Zeger and Liang, 1986). In contrast to the subject-specific model, Zeger et al. (1987) call this model a population-averaged (PA) model. This model is most useful for evaluating the association between the outcomes and the covariates as a population average. This model focuses on regression coefficients, while treating the nonindependence as a nuisance, and uses a "working" correlation matrix to approximate the nonindependence (Liang and Zeger, 1986). The PA model uses a generalized estimating equation (GEE) to estimate regression coefficients and intraclass correlation as a measure of nonindependence. The GEE approach extends the generalized linear model estimating equation to multivariate responses. Zeger et al. (1987) surnmarized the advantage of the PA model as follows:

Not to be confused with the conditional logistic analysis advocated by Breslow and Day (1980).

the population-averaged response for a given covariate, X_{it} , is directly estimable from observations without assumptions about the heterogeneity across individuals in the parameters. PA parameters are in this sense one step closer to the data than SS parameters.

Because both the marginal and standard logistic models use the logistic form of the marginal probability function, the estimators of both models have the same interpretation. Proponents of the marginal logistic model contend that the logistic form of the marginal probability function has a simpler interpretation than the logistic form of the conditional logistic function. The choice of model actually depends on the objective of the study. Because the main objective of our study is to assess the association of the outcomes with Vietnam service among veterans as a group (population-averaged response), the marginal logistic model is the more appropriate method. Thus, to evaluate the degree of nonindependence, we compared the results of the marginal logistic model (Liang's model) with the results of the standard logistic model. These comparisons quantify the lack of independence and determine whether the application of the standard logistic model is justifiable.

For these comparisons, we conducted three analyses. First, we compared the standard errors and betas of the two models, using several birth defect outcomes. The outcomes were arbitrarily selected to provide a range in the number of cases and the magnitude of the crude odds ratio (OR). For example, we selected all birth defect outcomes (1,416 cases, crude OR = 1.32), all nervous system birth defects (46 cases, crude OR = 2.37), and all circ. latory system birth defects (158 cases, OR=1.10). Results of these comparisons indicare the magnitude of the nonindependence problem. Second, we compared the ORs and the 95% confidence intervals (CIs) of the two models for all birth defect outcomes that were cf weak or borderline statistical significance when we used the standard logistic model. Ir these comparisons, we evaluated the effect of ignoring nonindependence on the statistical significance of the OR for each outcome. Third, we compared the ORs and the 95% Cls of the two models for all pregnancy outcomes. We compared all pregnancy outcomes because we expect, within a family, a higher correlation of pregnancy outcomes than of birth defect outcomes and because pregnancy outcomes are much more common events than birth defects. For all comparisons in the three analyses, we used a model adjusted for the seven primary covariates.

For the first analysis of selected birth defects, the two models show similar standard errors and betas. The differences for the standard error range from -0.0089 to 0.0063 and for the betas, from -0.0002 to 0.0067 (Table C-1). Intraclass correlations for Liang's model are 0.124

Table C-1. Comparison of Standard Errors (SE) and Betas of Vietnam Service for Liang's and Standard Logistic Models Adjusted for All Primary Covariates

| | SE | | | BETA | | | |
|---|----------------|--------|------------|--------|----------|------------|--|
| Outcomes | Liang Standard | | Difference | Liang | Standard | Differ∋nce | |
| All Birth Defects (1416 cases) | 0.0638 | 0.0575 | 0.0063 | 0.2599 | 0.2532 | 0.0)67 | |
| Birth Defects of Circulatory System (159 cases) | 0.1680 | 0.1654 | 0.0026 | 0.1422 | 0.1360 | 0.0)62 | |
| Birth Defects of Nervous System (46 cases) | 0.3335 | 0.3424 | -0.0089 | 0.8403 | 0.8405 | -0.0)02 | |

for all birth defect outcomes, 0.050 for circulatory system outcomes, and -0.001 for nervous system outcomes. For the second and third analyses of birth defect outcomes and pregnancy outcomes, the comparisons of the two models show that both models give similar ORs and arrive at the same conclusion on the basis of the confidence interval of the OR (Tables C-2 and C-3). These results are partly explained by the relatively small rumber of children in most families (2.1 children per veteran for those veterans with childrem). In summary, the results of these comparisons indicate that lack of independence for birth defects and pregnancy outcomes in our study is minimal; therefore, application of the standard logistic model is justified.

Table C-2. Comparison of Odds Ratios and 95% Confidence Intervals of Birth Defect Outcomes for Standard and Liang Logistic Models Adjusted for All Primary Covariates

| Outcome | Standard | | Llang | | | |
|-----------------------------------|----------|-----------|-------|------------|-------------|--|
| | OR | 95% CI | OR | 95% CI | Correlation | |
| All Birth Defects (1400 cases) | 1.29 | 1.15-1.44 | 1.30 | 1.14-1.47 | 0.124 | |
| Nervous System (46 cases) | 2.32 | 1.18-4.53 | 2.32 | 1.21-4.46 | 0.001 | |
| Ear, Face, Neck (59 cases) | 1.60 | 0.93-2.76 | 1.62 | 0.26-10.02 | 0.136 | |
| Circulatory (159 cases) | 1.15 | 0.83-1.58 | 1.15 | 0.83-1.60 | 0.050 | |
| Digestive System (189 cases) | 1.21 | 0.90-1.63 | 1.23 | 0.84-1.81 | 0.067 | |
| Urinary System (74 cases) | 1.40 | 0.86-2.26 | 1.42 | 0.63-3.20 | 0.103 | |
| Musculoskeletal (735 cases) | 1.25 | 1.07-1.46 | 1.24 | 1.05-1.48 | 0.140 | |
| Integument (58 cases) | 2.22 | 1.24-4.00 | 2.27 | 1.20-4.27 | 0.087 | |

Table C-3. Comparison of Odds Ratios and 95% Confidence Intervals of Pregnanc / Outcomes for Standard and Liang Logistic Models Adjusted for All Primary Covariates

| Outcome | St | andard | | | |
|------------------|------|-----------|------|-----------|-------------|
| | OR | 95% CI | OR | 95% CI | Correlation |
| Miscarriage | 1.27 | 1.17-1.37 | 1.26 | 1.15-1.39 |).132 |
| First trimester | 1.31 | 1.19-1.44 | 1.30 | 1.16-1.46 |).139 |
| Second trimester | 1.08 | 0.91-1.28 | 1.10 | 0.90-1.33 |).069 |
| Third trimester | 1.29 | 0.67-2.50 | 1.30 | 0.65-2.59 |).012 |
| Unknown | 1.32 | 0.93-1.87 | 1.27 | 0.84-1.91 |).090 |
| Induced Abortion | 1.04 | 0.91-1.19 | 1.00 | 0.84-1.18 |).261 |
| Tubal Pregnancy | 0.95 | 0.73-1.24 | 0.96 | 0.72-1.28 |).099 |
| All Short-Term | | | | | |
| Pregnancies | 1.19 | 1.11-1.28 | 1.18 | 1.09-1.28 |).173 |
| Stillbirth | 0.88 | 0.68-1.13 | 0.87 | 0.66-1.15 |).047 |

APPENDIX D

Forms Used in the General Birth Defects Study and the Cerebrospinal Malformations Study